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APPLICANTS

Jeffery Michael Barnes, Tucson, AZ;
 Brian Jeffrey Corcoran, Oro Valley, AZ;
 James Chien-Chiung Chen, Tucson, AZ;
 Minh-Ngoc Le Huynh, San Jose, CA;
 Frederick James Carberry II, Tucson, AZ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AZ	SHEETS DRAWING 8	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

33595

TITLE

METHOD, SYSTEM, AND PROGRAM FOR THROTTLING DATA TRANSFER

FILING FEE RECEIVED 1142	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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